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After presenting their case, the authors discuss the kind of lesion that should correspond with such a set of symptoms. They assume for the discussion generally accepted tentative schemata, and, on the authority of Wilbrand and Wernicke, the principle that optical images, including those of words and letters, are preserved in duplicate in the right and left optical centres. It is interesting, without going further into the discussion, to remark that the preservation of the names of objects, while those of printed letters and words are lost, depends on the association of other sensations with that of sight in the case of the objects. The sight of the object calls up the associated sensations—for example, touch sensations among the rest, or they are directly excited by handling the object. The connection between the touch centre and that of speech is uninjured, and makes possible the giving of the name. The image of the printed letter or word, on the contrary, has no other associations (or almost none), and so when the direct connection between the optical and speech centres is broken there is no byway by which the latter can be reached. Written letters and words have an advantage in associated motor sensations, and by means of them, as in the case of this patient, the spoken equivalent may be reached.

*Aerophobia.* Dr. ANDREA VERGA. Translated in Am. Jour. Insanity, October, 1888.

In this paper, read somewhat over a year ago at the congress of alienists at Pavia, the author makes confession of his own extreme dread of high places. Though fearless of the contagion of cholera, he has palpitations on mounting a step-ladder, finds it unpleasant to ride on the top of a coach or to look out of even a first-story window, and has never used an elevator. Merely thinking of those that have cast themselves from high places sets him tingling in the calves of his legs, his heels and the soles of his feet, or in his neck. He even experiences physical discomfort at the thought of the earth spinning through space and the imaginary possibility of the centrifugal overbalancing the centripetal force. He finds this fear growing upon him with years, as sight and hearing and the courage that they give begin to fail; even the small feats of walking in high places that were once possible to him he can no longer perform. The translator of the article also confesses the same fear. In his case the special dread that he feels on seeing a child near an open window has been given a peculiar force by the fatal fall from a window of the child of a friend. There are no doubt many other cases where the feeling has been caused or intensified by such shocking experiences.

*A Rare Form of Mental Disease (Grübelsucht).* CONOLLY NORMAN. Journal of Mental Science, October, 1888.

As the name of this disease signifies, the sufferer from it torments himself with endless questionings and needless investigations. The case here related was that of a married woman, thirty-two years old, who had been prepared for disease by excessive child-bearing and nursing in unfavorable circumstances. The trouble began in feelings of suffocation on waking, and the fear that if she did not rise at once the walls would fall in, she should go crazy, or something else dreadful would happen. After a time she began to feel compelled to examine any bit of straw or paper or glass that she

saw. In the street she must find out what any scrap of written or printed paper was and to what it referred. Once having passed some such bits in the evening she was unable to sleep, and finally had to waken one of her sons and go and get the papers. In doing so she shut her eyes to avoid getting into the same trouble again. For the same reason she stayed as much as possible in a darkened room. These feelings materially interfered with her house-work. Thyme in the soup led to such questionings as these: "I asked myself, is that a little bit of thyme? It might be something else. That other little bit—is it thyme? I shall never be sure that all these little pieces are thyme. Can there be anything else but thyme in it? What *is* thyme?" She had to read every word in the newspaper. She was oppressed by a sense of the unreality of things; was unable to act with decision. Yielding to the impulses brought a temporary sense of relief, but denial of them led to nervous attacks, which also followed slight shocks, the necessity for prompt action, or even came uncaused. These began with a fearful sense of something to happen, of something wrong, and of helplessness, and went on to confusion, pain in the vertex, buzzing in the ears, and finally trembling and an outburst of perspiration. She was painfully conscious of her trouble and feared insanity. With cessation of nursing, etc., nourishing food and tonics, and the encouragement that she would get well, she gradually improved, was able to get control of her impulses, and finally made a good recovery.

*Ueber psychische Infection.* ROBERT WOLLENBERG. Archiv f. Psychiatrie, Bd. XX, H. 1.

From the study of a large number of books and articles, the author gives a comprehensive statement of present information on the subject of what has been known in France as *folie communiquée*, *folie simultanée*, *folie similaire*, *folie à deux*, *à trois*, etc., and in Germany as *inducirtes Irresein*, *communicirter Wahnsinn*, *Simultanwahnsinn*, and *psychische Contagion*, *Ansteckung* or *Infection*. The conditions that favor transfer of the insane ideas, the kinds transferred, the prognosis and treatment, etc., are discussed, and illustrated by brief abstracts of cases, often by many. In conclusion the author shows at length, in an interesting case of his own, how delusions of persecution grew up in the minds of two sisters, and were by degrees accepted by their father. To the article is appended a bibliography of 103 titles, of which the first 43 relate to psychic epidemics, the remainder to sporadic cases affecting only a few individuals.

*Ueber Intentionspsychosen, mit Nachtrag.* LUDWIG MEYER. Archiv f. Psychiatrie, Bd. XX, H. 1.

Cases in which, as a result of psychic shock, associations of such a nature are formed that the most trivial objects or events call up vast psychic disturbances, are not very rare. For this general group of cases, Meyer proposes the term "Intentionspsychosen," because in them the most striking feature, both to the patient and the physician, is morbid attention (*intentio*) to some immediately present sensation, having in mind also certain analogies to "Intentionstremor," and the dependence of the latter on intended movements. Both sensory and motor cases are included, and of them a number of illustrative cases are given—of the first, a lawyer who found himself prevented from writing in the presence of others, by attacks of dizziness.